

(Petition to Establish Prior Receipt in the PTO of Item(s) Considered as Omitted
by the PTO--Response to "Notice of Omitted Items"--page 1 of 3)

5. Fee Payment

This is a **nonprovisional** application.

The petition fee, 37 Section 1.17(h), is paid as follows:

A check is attached in the sum of \$ 130.00

RECEIVED

JUN 18 2001

OFFICE OF PETITIONS

Please charge Account 16-1435 for any fee deficiency for this petition. A duplicate of this sheet is attached for that purpose.

6. Request for Refund

It is respectfully requested that, upon grant of the petition under 37 C.F.R. Section 1.53(e), the petition fee be refunded by payment of refund by check.

Date: 6/14/01

J. Jason Link (Reg. No. 44,874) for
Charles W. Calkins
(Reg. No. 31,814)

J. Jason Link (Reg. No. 44,874) for

Charles W. Calkins
Registration No. 31,814
Kilpatrick Stockton LLP
1001 West Fourth Street
Winston-Salem, NC 27101
336-607-7315

BEST AVAILABLE COPY

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND			
1 Date of Request: <u>7/8/01</u>		2 Serial/Patent # <u>09/776,984</u>	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
			6 AMOUNT
<input type="checkbox"/>	Filing		\$
<input type="checkbox"/>	Amendment		\$
<input type="checkbox"/>	Extension of Time		\$
<input type="checkbox"/>	Notice of Appeal/Appeal		\$
<input checked="" type="checkbox"/>	Petition	<u>3</u>	<u>6/14/01</u> \$ <u>130.00</u>
<input type="checkbox"/>	Issue		\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.		\$
<input type="checkbox"/>	Maintenance		\$
<input type="checkbox"/>	Assignment		\$
<input type="checkbox"/>	Other		\$
		7 TOTAL AMOUNT OF REFUND \$ <u>130.00</u>	
		8 TO BE REFUNDED BY:	
10 REASON:		<input type="checkbox"/> Treasury Check	
<input type="checkbox"/>	Overpayment	<input checked="" type="checkbox"/> Credit Deposit A/C #:	
<input type="checkbox"/>	Duplicate Payment	9 <u>1</u> <u>6</u> -- <u>1</u> <u>4</u> <u>3</u> <u>5</u>	
<input checked="" type="checkbox"/>	No Fee Due (Explanation):		
<u>Petition GRANTED.</u>			
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: <u>CHARLEMA GRANT</u>		TITLE: <u>ATTORNEY</u>	
SIGNATURE: <u>Charlema Grant</u>		PHONE: <u>306-0251</u>	
OFFICE: <u>Peterson</u>			
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****			
APPROVED: <u>Hana Chase</u>		DATE: <u>8-24-01</u>	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: